

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**DISCLOSURE REPORT  
CANDIDATE COMMITTEE**

**SECTION I-CANDIDATE AND CANDIDATE COMMITTEE:**

(a) Candidate Name: (Must be same as on Form CC-1)

Jerry L. Chang

(b) Committee Name: Friends of Jerry Chang

(c) Mailing Address: 1022 Awele Place

Hilo, HI. 96720

(d) Phone: (Bus) 935-8551 (Res) 959-5957

Treasurer's

**SECTION II-TYPE OF REPORT AND REPORTING PERIOD:**

Check Appropriate Box(es) 10/24/00 through 11/07/00

- ☐ 1st Preliminary Primary ☐ Amended  
☐ 2nd Preliminary Primary ☐ Short Form (11-212)  
☐ Final Primary ☐ Short Form (11-213)  
☐ Preliminary General  
☒ Final General  
☐ Supplemental

**SECTION III (Part 1)-SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(Complete Section III (Part 2) on the Back of this Form Before Completing This Section)

	COLUMN A TOTAL THIS PERIOD	COLUMN B ELECTION PERIOD TOTAL TO DATE
1. Cash on Hand at Beginning of Election Period (Continuing Committee) OR at the time Form CC-1 was Filed (New Committee).....		\$19,527.82
2. Cash on Hand at Beginning of this Reporting Period.....	\$15,240.50	
3. Total Receipts with Loans (From Line 17, Column A and B).....	\$500.00	\$38,722.64
4. Subtotal (Add Lines 2 and 3 for Column A and Lines 1 and 3 for Column B).....	\$15,740.50	\$58,250.46
5. Subtotal Disbursements (From Line 21, Column A and B).....	\$1,665.03	\$44,174.99
6. Cash on Hand at Closing of this Reporting Period (Subtract Line 5 from Line 4 for Columns A and B).....	\$14,075.47	\$14,075.47
7. (a) Total of Expenditures and Fundraising Expenditures (Unpaid) at Beginning of this Reporting Period.....		
(b) Net Change of Expenditures and Fundraising Expenditures (Unpaid) (From Line 22, Column A).....		
(c) Total of Expenditures and Fundraising Expenditures (Unpaid) at Closing of this Reporting Period (Add Lines 7(a) and 7(b)).....		
8. Total of Loans at Closing of this Reporting Period (Schedule E, Line 10).....		
9. Debts Owed BY the Candidate Committee at Closing of this Reporting Period (Add Lines 7(c) and 8).....		
10. Other Adjustments to Surplus/Deficit (Attach Explanation).....		
11. Subtotal (Add Lines 9 and 10).....		
12. Surplus/Deficit (Subtract Line 11 from Line 6).....	\$14,075.47	

I hereby certify that the information on this report and all attached Schedules are true, correct and complete to the best of my knowledge.

Candidate

Date

Treasurer

Date

Form CC-5 (7/95)

**SECTION III (2)-DETAILED SUMMARY OF RECEIPTS AND DISBURSEMENTS**  
(If Necessary, Complete Schedules A through H Before Completing This Section)

<b>RECEIPTS</b>		<b>COLUMN A</b>	<b>COLUMN B</b> <b>ELECTION PERIOD</b> <b>TOTAL TO DATE</b>
		<b>TOTAL THIS PERIOD</b>	
<b>13. Contributions From:</b>			
(a) Individuals/Other Entities/Noncandidate Committees			
(i) Monetary Contributions of \$100 or Less.....		\$100.00	\$18,351.00
(ii) Non-Monetary Contributions of \$100 or Less.....			\$169.00
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule A, Line 2 for Column A).....		\$400.00	\$19,574.79
(iv) Total Contributions from Individuals/Other Entities/Noncandidate Committees (Add Lines (a)(i) through (a)(iii) for Columns A and B).....		\$500.00	\$38,094.79
(b) Political Party Committees			
(i) Monetary Contributions of \$100 or Less.....			
(ii) Non-Monetary Contributions of \$100 or Less.....			
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule G, Line 2 for Column A).....			
(iv) Total Contributions from Political Party Committees (Add Lines (b)(i) through (b)(iii) for Columns A and B).....			
(c) Candidate and Candidate's Immediate Family			
(i) Monetary Contributions of \$100 or Less.....			
(ii) Non-Monetary Contributions of \$100 or Less.....			
(iii) Aggregate Monetary and Non-Monetary Contributions of More Than \$100 (Schedule D, Line 2 for Column A).....			
(iv) Total Contributions from Candidate and Candidate's Immediate Family (Add Lines (c)(i) through (c)(iii) for Columns A and B).....			
(d) Total Contributions (Add Lines 13(a)(iv), 13(b)(iv) and 13(c)(iv) for Columns A and B).....		\$500.00	\$38,094.79
<b>14. Public Funds and Other Receipts (Interest, Refunds, Etc.) (Schedule C, Line 2 for Column A).....</b>			\$627.85
<b>15. Total Receipts without Loans (Add Lines 13(d) and 14 for Columns A and B).....</b>		\$500.00	\$38,722.64
<b>16. Loans</b>			
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 1 for Column A)			
(b) Financial Institutions (Schedule E, Line 4 for Column A).....			
(c) Other Loans (Schedule E, Line 7 for Column A).....			
(d) Total Loans (Add Lines 16(a) through 16(c) for Columns A and B).....			
<b>17. Total Receipts with Loans (Add Lines 15 and 16(d) for Columns A and B).....</b>		\$500.00	\$38,722.64
<b>DISBURSEMENTS</b>			
<b>18. Expenditures (Schedule B, Line 3 for Column A).....</b>		\$1,665.03	\$29,849.30
<b>19. Fundraising Expenditures (Schedule F, Line 3 for Column A).....</b>			\$13,325.69
<b>20. Loan Repayments</b>			
(a) Candidate and Candidate's Immediate Family (Schedule E, Line 2 for Column A)			\$1,000.00
(b) Financial Institutions (Schedule E, Line 5 for Column A).....			
(c) Other Loans (Schedule E, Line 8 for Column A).....			
(d) Total Loan Repayments (Add Lines 20(a) through 20(c) for Columns A and B)...			
<b>21. Subtotal Disbursements (Add Lines 18, 19, and 20(d) for Columns A and B).....</b>		\$1,665.03	\$44,174.99
<b>22. Expenditures and Fundraising Expenditures (Unpaid) (Schedule H, Line 7 for Column A) (Net Change This Period).....</b>			
<b>23. Total Disbursements (Add Lines 21 and 22 for Columns A and B).....</b>		\$1,665.03	\$44,174.99

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE A**

**INDIVIDUALS/OTHER ENTITIES/NONCANDIDATE COMMITTEES  
AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100  
CANDIDATE COMMITTEE**

REMINDER: NON-MONETARY CONTRIBUTIONS ARE ALSO REQUIRED TO BE REPORTED AS EXPENDITURES (Schedule B) OR FUNDRAISING EXPENDITURES (Schedule F), WHICHEVER IS APPLICABLE.  
NO INFORMATION OR COPIES FROM THE REPORTS SHALL BE SOLD OR USED BY ANY PERSON FOR THE PURPOSE OF SOLICITING CONTRIBUTIONS OR FOR ANY COMMERCIAL PURPOSE.

CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

PAGE 1 OF 1

**Jerry L. Chang / Friends of Jerry Chang**

DATE OF RECEIPT AND/OR DEPOSIT	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF INDIVIDUAL, OTHER ENTITY OR NONCANDIDATE COMMITTEE	NAME OF EMPLOYER (IF INDIVIDUAL)	AMOUNT OF CONTRIBUTION OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD	AGGREGATE ELECTION PERIOD TOTAL TO DATE
	IF A DEPENDENT MINOR, ENTER NAME OF PARENT (IF INDIVIDUAL)	OCCUPATION (IF INDIVIDUAL)		
10/26/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		\$150.00	\$150.00
	Concerned Associates Employees, PAC			
	250 Carpenter Freeway Irving, Texas 75062			
10/26/00	<input type="checkbox"/> NON-MONETARY CONTRIBUTION		\$250.00	\$250.00
	ARDA			
	1220 L St., N.W. Suite 500 Washington, D.C. 20005			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			
	<input type="checkbox"/> NON-MONETARY CONTRIBUTION			

1. SUBTOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (THIS PAGE)..... **\$400.00**
2. TOTAL OF AGGREGATE MONETARY AND NON-MONETARY CONTRIBUTIONS OF MORE THAN \$100 THIS PERIOD (LAST PAGE THIS LINE ONLY) (ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 13 (a)(iii), COLUMN A)..... **\$400.00**

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

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Jerry L. Chang / Friends of Jerry Chang

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/24/00	Union Pen Co. 70 Riverdale Ave Greenwich, Ct. 06831	Value Stickers / Stick On Envelopes	\$654.35
10/24/00	Digial Printers Of Hawaii 28 Pookela St. Hilo, Hi. 96720	Typeset / Layout	\$46.88
10/24/00	Saint Joseph School Hilo, Hi. 96720	Donation / Country Fair	\$25.00
10/24/00	University of Hawaii Foundation Honolulu, Hi.	Donation	\$100.00
10/24/00	Coalition for Affordable Long Term Care 2651 Pali Hwy. Honolulu, Hi. 96817	Donation / Membership	\$26.00
10/24/00	The Friends of Joe Sniffen C/O Lincoln Victor Honolulu, Hi.	Donation	\$25.00
10/24/00	Hawaii Tribune Herald 355 Kinooole St. Hilo, Hi. 96720	Ad / Veterans Day	\$45.80

- SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....
- TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....
- TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A).....

**\$923.03**

**STATE OF HAWAII  
CAMPAIGN SPENDING COMMISSION**

**SCHEDULE B  
EXPENDITURES  
CANDIDATE COMMITTEE**

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CANDIDATE AND CANDIDATE COMMITTEE NAME: (Must be same as on Form CC-1)

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OF 2

**Jerry L. Chang / Friends of Jerry Chang**

DATE OF EXPENDITURE	FULL NAME, STREET ADDRESS, CITY, STATE AND ZIP CODE OF VENDOR OR SOURCE OF NON-MONETARY CONTRIBUTION	PURPOSE OF EXPENDITURE OR DESCRIPTION OF NON-MONETARY CONTRIBUTION	AMOUNT OF PAID EXPENDITURE OR FAIR MARKET VALUE OF NON-MONETARY CONTRIBUTION THIS PERIOD
10/24/00	Seaside Restaurant 1790 Kal. Ave. Hilo, Hi. 96720	Dinner / U.S. Dept. of Ag Group Dinner	\$350.00
10/24/00	Japanese Chamber of Commerce 400 Hualani St. Hilo, Hi. 96720	Ticket / Taste of Hawaii	\$35.00
10/27/00	KTA 50 E. Puainako Ave. Hilo, Hi. 96720	Donation / Gift Certificates / 19th Hole Golf Club Tournament	\$50.00
10/27/00	Island Art & Framing 1383 Queen Emma Honolulu, Hi. 96813	Framing / Diplomatic Gifts from Taiwan	\$307.00

- |   |                   |
|---|-------------------|
| 1. SUBTOTAL OF EXPENDITURES THIS PERIOD (THIS PAGE).....  | <b>\$742.00</b>   |
| 2. TOTAL OF UNPAID EXPENDITURES PAID THIS PERIOD (LAST PAGE THIS LINE ONLY) (DO NOT ITEMIZE. ENTER TOTAL FROM FORM CC-5(H) (SCHEDULE H), LINE 4).....       |                   |
| 3. TOTAL OF EXPENDITURES THIS PERIOD (LAST PAGE THIS LINE ONLY) (ADD LINES 1 AND 2. ENTER TOTAL ON FORM CC-5, SECTION III (PART 2), LINE 18, COLUMN A)..... | <b>\$1,665.03</b> |